

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Friends of Farr

ADDRESS (number and street)

555 Capitol Mall, Suite 1425

Check if different  
than previously  
reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

C

C00290429

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

CA

17

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
06 / 05 / 2012in the  
State of

CA

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y  
06 / 05 / 2012in the  
State of

CA

5. Covering Period

M M / D D / Y Y Y Y  
07 / 01 / 2011

through

M M / D D / Y Y Y Y  
09 / 30 / 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sidney Slade

Signature of Treasurer

Sidney Slade

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
10 / 13 / 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

**Friends of Farr**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	1

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	67935.00	197650.20
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	3379.95
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	67935.00	194270.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	43312.18	166797.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1000.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	43312.18	165797.51
8. Cash on Hand at Close of Reporting Period (from Line 27).....	99177.43	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	1272.84	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Friends of Farr

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	1

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

8750.00

65455.36

(ii) Unitemized.....

4836.00

19862.00

(iii) TOTAL of contributions from individuals ▶

13586.00

85317.36

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

54349.00

112332.84

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

67935.00

197650.20

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

873.93

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

1000.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

334.82

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

67935.00

199858.95

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43312.18	166797.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	3379.95
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	3379.95
21. OTHER DISBURSEMENTS .....	13670.00	37320.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	56982.18	207497.46

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	88224.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	67935.00
25. SUBTOTAL (add Line 23 and Line 24).....	156159.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	56982.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	99177.43

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 60

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Friends of Farr**

**A.** Full Name (Last, First, Middle Initial)  
**Larry W. Anderson**

Mailing Address **7422 Altrus Court**

City **Monterey** State **CA** Zip Code **93940**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2011

Transaction ID : INCA14014

Amount of Each Receipt this Period

<b>500.00</b>
---------------

**B.** Full Name (Last, First, Middle Initial)  
**Peter E. Blackstock**

Mailing Address **1134 Madre Lane**

City **Pebble Beach** State **CA** Zip Code **93953**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Lexus of Monterey Peninsula & Victory** Occupation **Owner**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2011

Transaction ID : INCA14068

Amount of Each Receipt this Period

<b>1000.00</b>
----------------

**C.** Full Name (Last, First, Middle Initial)  
**Henry Carter**

Mailing Address **77 Grand View, #702**

City **San Francisco** State **CA** Zip Code **94114**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Global Crown Capital LLC** Occupation **Attorney**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2011

Transaction ID : INCA14100

Amount of Each Receipt this Period

<b>100.00</b>
---------------

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

<b>1600.00</b>
----------------

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 60

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial) <b>Maria Del Pilar Centurion</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 07 / 2011
Mailing Address 100 Clock Tower Place, Suite 225		Transaction ID : INCA13961
City Carmel	State CA	
Zip Code 93923		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Artist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) <b>Maria Del Pilar Centurion</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 18 / 2011
Mailing Address 100 Clock Tower Place, Suite 225		Transaction ID : INCA14087
City Carmel	State CA	
Zip Code 93923		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Artist	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) <b>Richard T. Dauphine</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 20 / 2011
Mailing Address 980 Cass Street		Transaction ID : INCA13992
City Monterey	State CA	
Zip Code 93940		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer R.T. Dauphine, M.D., F.A.C.S.	Occupation Physician	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**John J. Davis, Jr.**

Mailing Address 1242 De Haro

City

San Francisco

State

CA

Zip Code

94107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Davis, Cowell & BoweOccupation  
Attorney

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2011

Transaction ID : INCA14088

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Howard L. Dickstein**

Mailing Address 2760 Laurel Drive

City

Sacramento

State

CA

Zip Code

95864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Attorney

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2011

Transaction ID : IDTA3150

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JStreetPAC**

Mailing Address P.O. Box 33106

City

Washington

State

DC

Zip Code

20033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2011

Transaction ID : INCA14061IDTA3150

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : INCA14061IDTA3150

Total Earmarked through conduit PAC limit not affected

Form/Schedule:

Transaction ID:



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 60

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

**A.** Full Name (Last, First, Middle Initial)  
**Michael B. Gallagher**

Mailing Address 1035 Barrow Lane

City Napa	State CA	Zip Code 94558
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer City Pass, Inc.	Occupation President
-------------------------------------	-------------------------

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2011

Transaction ID : INCA14034

Amount of Each Receipt this Period

250.00
--------

**B.** Full Name (Last, First, Middle Initial)  
**Laurence P. Horan**

Mailing Address 9568 Oak Court

City Carmel	State CA	Zip Code 93923
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Horan Lloyd Law Firm	Occupation Attorney
--	------------------------

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2011

Transaction ID : INCA14064

Amount of Each Receipt this Period

500.00
--------

**C.** Full Name (Last, First, Middle Initial)  
**Anna Lambourne**

Mailing Address 249 Forest Ridge Road, #4

City Monterey	State CA	Zip Code 93940
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2011

Transaction ID : INCA14032

Amount of Each Receipt this Period

250.00
--------

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00
---------

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 60

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. Mary Ann Lloyd

Mailing Address 25785 Hatton Road

City

Carmel

State

CA

Zip Code

93923

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Monterey Peninsula College

Occupation

Library Director

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2011

Transaction ID : INCA14103

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Susan McCabe

Mailing Address 122 Voyage Mall

City

Marina Del Rey

State

CA

Zip Code

90292

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Universal Music Group

Occupation

Paralegal

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2011

Transaction ID : INCA13952

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Muftiah McCartin

Mailing Address 1441 North Inglewood Street

City

Arlington

State

VA

Zip Code

22205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Convington &amp; Burling, LLP

Occupation

Attorney

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2011

Transaction ID : INCA13998

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

850.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 60

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

A. Full Name (Last, First, Middle Initial)  
**Herbert G. Meyer**

Mailing Address 400 Camino Aguajito

City	State	Zip Code
Monterey	CA	93940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Harold Company

Occupation  
Rancher

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2011

Transaction ID : INCA14104

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)  
**John H. Montgomery**

Mailing Address 101 Constitution Avenue, Suite 900

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Murray, Montgomery & O'Donnell

Occupation  
Attorney

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2011

Transaction ID : INCA14112

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)  
**Rowland Rebele**

Mailing Address 323 Kingsburg Drive

City	State	Zip Code
Aptos	CA	95003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
R. K. Rebele Consultant

Occupation  
Consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2011

Transaction ID : INCA14063

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 60

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Stenholm**  
 Mailing Address 606 Golden Eye Drive

City State Zip Code  
 Granbury TX 76049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Olsson Frank Weeda

Occupation  
 Policy Advisor

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 15 2011

Transaction ID : INCA13977

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
**Priscilla Helm Walton**  
 Mailing Address 118 White Oaks Lane

City State Zip Code  
 Carmel Valley CA 93924

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 University of California, Santa Cruz

Occupation  
 Professor

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 05 2011

Transaction ID : INCA13963

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Warner**  
 Mailing Address 215 Trescony Street

City State Zip Code  
 Santa Cruz CA 95060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 University of California, Santa Cruz

Occupation  
 Administrator

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 18 2011

Transaction ID : INCA14099

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

550.00

8750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 60

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. Action Committee for Rural Electrification (ACRE)**

Mailing Address 4301 Wilson Blvd.

City	State	Zip Code
Arlington	VA	22203

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA14133

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Aircraft Owners and Pilots Association PAC (AOPA PAC)**

Mailing Address 421 Aviation Way

City	State	Zip Code
Frederick	MD	21701

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2011

Transaction ID : INCA13985

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. ALPA - PAC Air Line Pilots Association PAC**

Mailing Address 1625 Massachusetts Avenue, NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2011

Transaction ID : INCA13984

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 60

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. American Academy of Pediatric Dentistry PAC**

Mailing Address 211 East Chicago Avenue, #700

City	State	Zip Code
Chicago	IL	60611

FEC ID number of contributing federal political committee.

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2011

Transaction ID : INCA14110

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**B. American Airlines PAC**

Mailing Address 1101 17th Street, NW, #600

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee.

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2011

Transaction ID : INCA13967

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C. American Assn. of Crop Insurers AACI-PAC**

Mailing Address One Massachusetts Ave., NW, Ste. 8

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing federal political committee.

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2011

Transaction ID : INCA13968

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 60

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. American Association for Justice PAC (AAJ PAC)**

Mailing Address 777 6th Street, NW, Suite 200

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2011

Transaction ID : INCA14122

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. American Federation of State, County & Municipal Employees AFL-CIO PEOPLE**

Mailing Address 1625 L Street, NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2011

Transaction ID : INCA14020

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. American Federation of State, County & Municipal Employees AFL-CIO PEOPLE**

Mailing Address 1625 L Street, NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2011

Transaction ID : INCA14113

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 60

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. American Federation of Teachers COPE Voluntary**

Mailing Address 555 New Jersey Avenue, NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 07 2011

Transaction ID : INCA13964

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. American Hospital Association PAC**

Mailing Address 325 Seventh Street, NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 02 2011

Transaction ID : INCA14011

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. American Physical Therapy Association Physical Therapy PAC (PT-PAC)**

Mailing Address 1111 North Fairfax Street

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 29 2011

Transaction ID : INCA14003

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 60

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. American Society of Anesthesiologists Political Action Committee**

Mailing Address 520 N. Northwest Highway

City	State	Zip Code
Park Ridge	IL	60088

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		02		2011

Transaction ID : INCA14012

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. American Society of Association Executives PAC**

Mailing Address 1575 I Street, NW

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		28		2011

Transaction ID : INCA14006

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. American Veterinary Medical Association PAC (AVMA PAC)**

Mailing Address 1910 Sunderland Place, NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		15		2011

Transaction ID : INCA14082

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 60

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

A. Full Name (Last, First, Middle Initial)  
**Anheuser-Busch Political Action Committee**

Mailing Address 1401 I Street, NW, Suite 200

City State Zip Code  
Washington DC 20052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2011

Transaction ID : INCA14131

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**Biotechnology Industry Organization PAC**

Mailing Address 1201 Maryland Avenue, SW, Suite 90

City State Zip Code  
Washington DC 20024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 10 2011

Transaction ID : INCA14019

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**Blue Shield of California PAC**

Mailing Address 50 Beale Street, #17-C356

City State Zip Code  
San Francisco CA 94105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 26 2011

Transaction ID : INCA14124

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 60

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**Boeing Political Action Committee Federal**

Mailing Address 1220 Wilson Blvd.

City	State	Zip Code
Arlington	VA	22209

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : INCA14132

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Brown Rudnick Federal PAC**

Mailing Address 1 Financial Center

City	State	Zip Code
Boston	MA	02111

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2011

Transaction ID : INCA13969

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**California Beet Growers Association Ltd. PAC**

Mailing Address 2 West Swain Road

City	State	Zip Code
Stockton	CA	95207

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2011

Transaction ID : INCA13970

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 60

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**Elect Lynn Robinson for City Council 2010**

Mailing Address 849 Almar Avenue, #C114

City State Zip Code  
Santa Cruz CA 95060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

99.00

Date of Receipt

M M / D D / Y Y Y Y  
09 18 2011

Transaction ID : INCA14089

Amount of Each Receipt this Period

99.00

Federally Permissible Funds

Full Name (Last, First, Middle Initial)

**Holland & Knight Committee for Effective Government PAC**

Mailing Address 2099 Pennsylvania Avenue, NW, #100

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 25 2011

Transaction ID : INCA13995

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**Honeywell International PAC (HIPAC)**

Mailing Address 101 Constitution Avenue, NW, #500W

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 22 2011

Transaction ID : INCA13990

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1599.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 60

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**Independent Community Bankers PAC (ICBPAC)**

Mailing Address 1615 L Street, NW, Suite 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 15 2011

Transaction ID : INCA13972

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**Johnson & Johnson PAC**

Mailing Address One Johnson & Johnson Plaza

City State Zip Code  
New Brunswick NJ 08933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 27 2011

Transaction ID : INCA14121

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JStreetPAC**

Mailing Address P.O. Box 33106

City State Zip Code  
Washington DC 20033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 29 2011

Transaction ID : INCA14130

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 60

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**Friends of Farr**

 Full Name (Last, First, Middle Initial)  
**A. NATCA PAC/National Air Traffic Controllers Association PAC**

Mailing Address 1325 Massachusetts Avenue, NW

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2011

Transaction ID : INCA13996

Amount of Each Receipt this Period

1000.00

 Full Name (Last, First, Middle Initial)  
**B. National Association for Uniformed Services PAC (NAUS-PAC)**

Mailing Address 5535 Hempstead Way

City	State	Zip Code
Springfield	VA	22151

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2011

Transaction ID : INCA13973

Amount of Each Receipt this Period

1000.00

 Full Name (Last, First, Middle Initial)  
**C. National Committee to Preserve Social Security & Medicare PAC**

Mailing Address 10 G Street, NE, Suite 600

City	State	Zip Code
Washington	DC	20002

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2011

Transaction ID : INCA14111

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 60

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**National Tour Association Inc. TOURPAC**

Mailing Address 546 East Main Street

City

Lexington

State

KY

Zip Code

40508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2011

Transaction ID : INCA13975

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**NBWA/National Beer Wholesalers Association Fed PAC**

Mailing Address 1101 King Street, Suite 600

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2011

Transaction ID : INCA14081

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**Ocean Champions PAC - Federal**

Mailing Address 202 San Jose Avenue

City

Capitola

State

CA

Zip Code

95010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2011

Transaction ID : INCA13974

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Friends of Farr**

A. Full Name (Last, First, Middle Initial)  
**Ocean Champions PAC - Federal**

Mailing Address 202 San Jose Avenue

City State Zip Code  
Capitola CA 95010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2011

Transaction ID : INCA14142

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**Pacific Gas & Electric Corporation Energy PAC**

Mailing Address 77 Beale Street

City State Zip Code  
San Francisco CA 94177

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 26 2011

Transaction ID : INCA14125

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**PEACH-PAC California Canning Peach Association PAC**

Mailing Address 2300 River Plaza Drive, Suite 110

City State Zip Code  
Sacramento CA 95833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 22 2011

Transaction ID : INCA14109

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

A. Full Name (Last, First, Middle Initial)  
**Personal Care Products Council PAC**

Mailing Address 1101 17th Street, Suite 300

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 15 2011

Transaction ID : INCA13976

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**Sheet Metal Workers' International Association PAL**

Mailing Address 1750 New York Avenue, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 22 2011

Transaction ID : INCA14108

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)  
**Sugar Cane Growers Cooperative of Florida PAC**

Mailing Address P.O. Box 666

City State Zip Code  
Belle Glade FL 33430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 05 2011

Transaction ID : INCA13962

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 OF 60

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

**A.** Full Name (Last, First, Middle Initial)  
**Syngenta Corporation PAC**

Mailing Address **2 Righter Parkway**

City **Wilmington** State **DE** Zip Code **19850**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt

**09** / **27** / **2011**

Transaction ID : **INCA14123**

Amount of Each Receipt this Period

**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Troutman Sanders LLP Political Action Committee, Inc.**

Mailing Address **600 Peachtree Street, NE, Suite 52**

City **Atlanta** State **GA** Zip Code **30308**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt

**07** / **28** / **2011**

Transaction ID : **INCA14007**

Amount of Each Receipt this Period

**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**United Food and Commercial Workers Int'l Union Active Ballot Club**

Mailing Address **1775 K Street, NW**

City **Washington** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt

**09** / **27** / **2011**

Transaction ID : **INCA14120**

Amount of Each Receipt this Period

**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 60

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

Full Name (Last, First, Middle Initial)

**United Motorcoach Association PAC - Motorcoach Travel PAC**

Mailing Address 113 South West Street, 4th Floor

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2011

Transaction ID : INCA13978

Amount of Each Receipt this Period

1000.00

## **B. United Parcel Service Political Action Committee (UPSPAC)**

Full Name (Last, First, Middle Initial)

**United Parcel Service Political Action Committee (UPSPAC)**

Mailing Address 55 Glenlake Parkway, NE

City	State	Zip Code
Atlanta	GA	30328

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2011

Transaction ID : NONA14135

Amount of Each Receipt this Period

200.00

Facility Fee for Event

## **C. United Parcel Service Political Action Committee (UPSPAC)**

Full Name (Last, First, Middle Initial)

**United Parcel Service Political Action Committee (UPSPAC)**

Mailing Address 55 Glenlake Parkway, NE

City	State	Zip Code
Atlanta	GA	30328

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2011

Transaction ID : NONA14136

Amount of Each Receipt this Period

150.00

Fundraising Catering

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11C

Transaction ID : NONA14135

In-Kind Contribution

Form/Schedule: SA11C

Transaction ID: NONA14136

In-Kind Contribution

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

A. Full Name (Last, First, Middle Initial)  
**United Parcel Service Political Action Committee (UPSPAC)**

Mailing Address 55 Glenlake Parkway, NE

City State Zip Code  
Atlanta GA 30328

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 04 2011

Transaction ID : NONA14137

Amount of Each Receipt this Period

334.40

Fundraising Catering

B. Full Name (Last, First, Middle Initial)  
**United Parcel Service Political Action Committee (UPSPAC)**

Mailing Address 55 Glenlake Parkway, NE

City State Zip Code  
Atlanta GA 30328

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 04 2011

Transaction ID : NONA14138

Amount of Each Receipt this Period

660.00

Fundraising Catering

C. Full Name (Last, First, Middle Initial)  
**United Parcel Service Political Action Committee (UPSPAC)**

Mailing Address 55 Glenlake Parkway, NE

City State Zip Code  
Atlanta GA 30328

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2011

Transaction ID : INCA14134

Amount of Each Receipt this Period

655.60

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1650.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11C

Transaction ID : NONA14137

In-Kind Contribution

Form/Schedule: SA11C

Transaction ID: NONA14138

In-Kind Contribution

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 OF 60

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Farr**

**A.** Full Name (Last, First, Middle Initial)  
**US Travel Association PAC**

Mailing Address 1100 New York Avenue, NW, #450W

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2011

Transaction ID : INCA13979

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**USA Rice Federation PAC**

Mailing Address 4301 N. Fairfax Drive, Suite 425

City Arlington	State VA	Zip Code 22203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 02 / 2011

Transaction ID : INCA14013

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Wine Institute Federal PAC**

Mailing Address 607 14th Street, NW, Suite 800

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 28 / 2011

Transaction ID : INCA14008

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00  
54349.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address Payment Center

City	State	Zip Code
Sacramento	CA	95887

Purpose of Disbursement  
Phones

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		03		2011

Amount of Each Disbursement this Period

210.46
--------

Transaction ID : EXPB14009

**B. AT&T**

Mailing Address Payment Center

City	State	Zip Code
Sacramento	CA	95887

Purpose of Disbursement  
Phones

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		31		2011

Amount of Each Disbursement this Period

201.53
--------

Transaction ID : EXPB14036

**C. AT&T**

Mailing Address Payment Center

City	State	Zip Code
Sacramento	CA	95887

Purpose of Disbursement  
Phones

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		27		2011

Amount of Each Disbursement this Period

187.13
--------

Transaction ID : EXPB14118

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

599.12



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. Bethel Missionary Baptist Church**

Mailing Address P. O. Box 276

City	State	Zip Code
Seaside	CA	93955

Purpose of Disbursement  
Print Advertisement

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2011

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : EXPB13943

**B. Boots Road Group, LLC**

Mailing Address 211 W. Franklin Street

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Website Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2011

Amount of Each Disbursement this Period

413.40
--------

Transaction ID : EXPB14048

**C. Center for Community Advocacy**

Mailing Address 22 West Gabilan Street

City	State	Zip Code
Salinas	CA	93901

Purpose of Disbursement  
Advertising

004

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2011

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : EXPB14058

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1163.40

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. Edward Anderson dba Automated Mailing Services**

Mailing Address P.O. Box 1906

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Fundraising Mail Services

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2011

Amount of Each Disbursement this Period

850.13
--------

Transaction ID : EXPB14056

**B. U.S. Postmaster**

Mailing Address 565 Hartnell Street

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Fundraising Postage

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2011

Amount of Each Disbursement this Period

293.72
--------

Transaction ID : EDTB171EXPB14056

[MEMO ITEM]

**c. Edward Anderson dba Automated Mailing Services**

Mailing Address P.O. Box 1906

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Fundraising Printing Services

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2011

Amount of Each Disbursement this Period

1092.47
---------

Transaction ID : EXPB14055

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1942.60

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. U.S. Postmaster**

Mailing Address 565 Hartnell Street

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Fundraising Postage

003

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2011

Amount of Each Disbursement this Period

229.02
--------

Transaction ID : EDTB172EXPB14055

**[MEMO ITEM]****B. Federal Express Corp.**

Mailing Address P.O. Box 7221

City	State	Zip Code
Pasadena	CA	91109

Purpose of Disbursement  
Shipping

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		20		2011

Amount of Each Disbursement this Period

126.80
--------

Transaction ID : EXPB13966

**c. Federal Express Corp.**

Mailing Address P.O. Box 7221

City	State	Zip Code
Pasadena	CA	91109

Purpose of Disbursement  
Shipping

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		22		2011

Amount of Each Disbursement this Period

128.36
--------

Transaction ID : EXPB14031

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

255.16

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Capitol Assessment Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2011

Amount of Each Disbursement this Period

10.00
-------

Transaction ID : EXPB13989

**B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Meals with Constituents

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2011

Amount of Each Disbursement this Period

56.00
-------

Transaction ID : EXPB13988

**C. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Membership Dues

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2011

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : EXPB13987

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

106.00
--------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Capitol Assessment Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2011

Amount of Each Disbursement this Period

10.00
-------

Transaction ID : EXPB14042

**B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Membership Dues

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2011

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : EXPB14041

**c. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Meals with Constituents

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2011

Amount of Each Disbursement this Period

182.51
--------

Transaction ID : EXPB14040

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

232.51

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Membership Dues

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		16		2011

Amount of Each Disbursement this Period

50.00
-------

Transaction ID : EXPB14060

**B. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW, Suite 500

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Campaign Software

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		16		2011

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : EXPB14028

**c. Olson, Hagel & Fishburn, LLP**

Mailing Address 555 Capitol Mall, Suite 1425

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Legal & Reporting Services

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2011

Amount of Each Disbursement this Period

3031.10
---------

Transaction ID : EXPB13960

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4581.10

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

**A. Olson, Hagel & Fishburn, LLP**

Mailing Address 555 Capitol Mall, Suite 1425

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Legal & Reporting Services

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2011

Amount of Each Disbursement this Period

2841.60

Transaction ID : EXPB14024

**B. Olson, Hagel & Fishburn, LLP**

Mailing Address 555 Capitol Mall, Suite 1425

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Legal & Reporting Services

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2011

Amount of Each Disbursement this Period

1491.58

Transaction ID : EXPB14059

**C. Patricia Tempel dba Tempel's of Carmel Florist**

Mailing Address 3604 The Barnyard

City	State	Zip Code
Carmel	CA	93923

Purpose of Disbursement  
Flowers for Constituents

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		05		2011

Amount of Each Disbursement this Period

107.17

Transaction ID : EXPB13949

**SUBTOTAL** of Disbursements This Page (optional).....

4440.35

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

**A. The Frost Group, LLC**

Mailing Address 3422 Porter Street, NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement  
Fundraising Consulting

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2011

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : EXPB13945

Full Name (Last, First, Middle Initial)

**B. The Frost Group, LLC**

Mailing Address 3422 Porter Street, NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement  
Fundraising Consulting

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2011

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : EXPB14002

Full Name (Last, First, Middle Initial)

**c. The Frost Group, LLC**

Mailing Address 3422 Porter Street, NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement  
Fundraising Consulting

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		31		2011

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : EXPB14037

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10500.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. The Frost Group, LLC**

Mailing Address 3422 Porter Street, NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement  
Fundraising Consulting

003

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2011

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : EXPB14128

**B. Transfirst LLC**

Mailing Address 371 Centennial Parkway

City	State	Zip Code
Louisville	CO	80027

Purpose of Disbursement  
Transaction Fee

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		11		2011

Amount of Each Disbursement this Period

60.58
-------

Transaction ID : EXPB14016

**c. Transfirst LLC**

Mailing Address 371 Centennial Parkway

City	State	Zip Code
Louisville	CO	80027

Purpose of Disbursement  
Transaction Fee

001

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		10		2011

Amount of Each Disbursement this Period

65.01
-------

Transaction ID : EXPB14052

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3625.59

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. Transfirst LLC**

Mailing Address 371 Centennial Parkway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		12		2011

City	State	Zip Code
Louisville	CO	80027

Amount of Each Disbursement this Period

23.63
-------

Purpose of Disbursement  
Transaction Fee

001

**Transaction ID : EXPB14144**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2011

City	State	Zip Code
Sacramento	CA	95814

Amount of Each Disbursement this Period

78.25
-------

Purpose of Disbursement  
Bank Fee

001

**Transaction ID : EXPB13957**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2011

City	State	Zip Code
Sacramento	CA	95814

Amount of Each Disbursement this Period

354.42
--------

Purpose of Disbursement  
Office Supplies

001

**Transaction ID : EXPB13983**

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

456.30

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 1550 Canyon Del Rey Blvd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2011

City	State	Zip Code
Seaside	CA	93955

Amount of Each Disbursement this Period

354.42
--------

Purpose of Disbursement  
Office Supplies

001

Transaction ID : EDTB167EXPB13983

Candidate Name

Category/  
Type**[MEMO ITEM]**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2011

City	State	Zip Code
Sacramento	CA	95814

Amount of Each Disbursement this Period

92.00
-------

Purpose of Disbursement  
Storage Rental

001

Transaction ID : EXPB13981

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**c. Airport Road Self-Storage, Inc.**

Mailing Address 847 Airport Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2011

City	State	Zip Code
Monterey	CA	95814

Amount of Each Disbursement this Period

92.00
-------

Purpose of Disbursement  
Storage Rental

001

Transaction ID : EDTB165EXPB13981

Candidate Name

Category/  
Type**[MEMO ITEM]**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

92.00
-------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Internet Services

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	22	2011

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : EXPB13980

**B. Constant Contact, Inc.**

Mailing Address 1601 Trapelo Road, Suite 246

City	State	Zip Code
Waltham	MA	02451

Purpose of Disbursement  
Internet Services

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	22	2011

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : EDTB164EXPB13980

[MEMO ITEM]

**c. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Postage

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	22	2011

Amount of Each Disbursement this Period

7.45
------

Transaction ID : EXPB13982

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

82.45

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. U.S. Postmaster**

Mailing Address 565 Hartnell Street

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Postage

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		22		2011

Amount of Each Disbursement this Period

7.45
------

Transaction ID : EDTB166EXPB13982

**[MEMO ITEM]****B. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Bank Fee

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2011

Amount of Each Disbursement this Period

35.00
-------

Transaction ID : EXPB14023

**c. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Internet Services

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2011

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : EXPB14025

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

110.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. Constant Contact, Inc.**

Mailing Address 1601 Trapelo Road, Suite 246

City	State	Zip Code
Waltham	MA	02451

Purpose of Disbursement  
Internet Services

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2011

Amount of Each Disbursement this Period

496.06
--------

Transaction ID : EDTB169EXPB14025

**[MEMO ITEM]****B. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2011

Amount of Each Disbursement this Period

496.06
--------

Transaction ID : EXPB14027

**c. Staples**

Mailing Address 1550 Canyon Del Rey Blvd.

City	State	Zip Code
Seaside	CA	93955

Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2011

Amount of Each Disbursement this Period

496.06
--------

Transaction ID : EDTB168EXPB14027

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

496.06

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2011

City	State	Zip Code
Sacramento	CA	95814

Amount of Each Disbursement this Period

92.00
-------

Purpose of Disbursement  
Storage Rental

001

Transaction ID : EXPB14026

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Airport Road Self-Storage, Inc.**

Mailing Address 847 Airport Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2011

City	State	Zip Code
Monterey	CA	95814

Amount of Each Disbursement this Period

92.00
-------

Purpose of Disbursement  
Storage Rental

001

Transaction ID : EDTB170EXPB14026

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2011

City	State	Zip Code
Sacramento	CA	95814

Amount of Each Disbursement this Period

35.00
-------

Purpose of Disbursement  
Bank Fee

001

Transaction ID : EXPB14049

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

127.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

**A. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Storage Rental

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	19	2011

Amount of Each Disbursement this Period

92.00
-------

Transaction ID : EXPB14080

**B. Airport Road Self-Storage, Inc.**

Mailing Address 847 Airport Road

City	State	Zip Code
Monterey	CA	95814

Purpose of Disbursement  
Storage Rental

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	19	2011

Amount of Each Disbursement this Period

92.00
-------

Transaction ID : EDTB175EXPB14080

[MEMO ITEM]

**c. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Internet Services

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	19	2011

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : EXPB14078

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

167.00



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

**A. Constant Contact, Inc.**

Mailing Address 1601 Trapelo Road, Suite 246

City	State	Zip Code
Waltham	MA	02451

Purpose of Disbursement  
Internet Services

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2011

Amount of Each Disbursement this Period

94.16
-------

Transaction ID : EDTB174EXPB14078

[MEMO ITEM]

**B. U.S. Bank**

Mailing Address 621 Capitol Mall, Suite 800

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2011

Amount of Each Disbursement this Period

94.16
-------

Transaction ID : EXPB14079

**c. Staples**

Mailing Address 1550 Canyon Del Rey Blvd.

City	State	Zip Code
Seaside	CA	93955

Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2011

Amount of Each Disbursement this Period

94.16
-------

Transaction ID : EDTB173EXPB14079

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

94.16

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. United Parcel Service Political Action Committee (UPSPAC)**

Mailing Address 55 Glenlake Parkway, NE

City	State	Zip Code
Atlanta	GA	30328

Purpose of Disbursement  
Fundraising Catering

Candidate Name

**United Parcel Service Political Action Committee (UPSPAC)**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2011

Amount of Each Disbursement this Period

150.00
--------

Transaction ID : NONB14136

**B. United Parcel Service Political Action Committee (UPSPAC)**

Mailing Address 55 Glenlake Parkway, NE

City	State	Zip Code
Atlanta	GA	30328

Purpose of Disbursement  
Facility Fee for Event

Candidate Name

**United Parcel Service Political Action Committee (UPSPAC)**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2011

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : NONB14135

**C. United Parcel Service Political Action Committee (UPSPAC)**

Mailing Address 55 Glenlake Parkway, NE

City	State	Zip Code
Atlanta	GA	30328

Purpose of Disbursement  
Fundraising Catering

Candidate Name

**United Parcel Service Political Action Committee (UPSPAC)**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2011

Amount of Each Disbursement this Period

334.40
--------

Transaction ID : NONB14137

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

684.40

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SB17

Transaction ID : NONB14136

In-Kind Contribution

Form/Schedule: SB17

Transaction ID: NONB14135

In-Kind Contribution

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SB17

Transaction ID : NONB14137

In-Kind Contribution

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. United Parcel Service Political Action Committee (UPSPAC)**

Mailing Address 55 Glenlake Parkway, NE

City	State	Zip Code
Atlanta	GA	30328

Purpose of Disbursement  
Fundraising Catering

Candidate Name

**United Parcel Service Political Action Committee (UPSPAC)**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2011

Amount of Each Disbursement this Period

660.00
--------

**Transaction ID : NONB14138****B. Will, Plasha**

Mailing Address 325 Hannon Avenue

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2011

Amount of Each Disbursement this Period

3000.00
---------

**Transaction ID : EXPB13944****c. Will, Plasha**

Mailing Address 325 Hannon Avenue

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2011

Amount of Each Disbursement this Period

385.25
--------

**Transaction ID : EXPB13951****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4045.25

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB17

Transaction ID : NONB14138

In-Kind Contribution

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. Will, Plasha**

Mailing Address 325 Hannon Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2011

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Fundraising Consulting

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : EXPB14001

**B. Will, Plasha**

Full Name (Last, First, Middle Initial)

Mailing Address 325 Hannon Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2011

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Fundraising Consulting

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

231.75
--------

Transaction ID : EXPB14010

**C. Will, Plasha**

Full Name (Last, First, Middle Initial)

Mailing Address 325 Hannon Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		31		2011

City	State	Zip Code
Monterey	CA	93940

Purpose of Disbursement  
Fundraising Consulting

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : EXPB14038

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6231.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 60

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

**A. Will, Plasha**

Mailing Address 325 Hannon Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2011

City	State	Zip Code
Monterey	CA	93940

Amount of Each Disbursement this Period

3106.13
---------

Purpose of Disbursement  
Fundraising Consulting

003

Transaction ID : EXPB14054

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Will, Plasha**

Mailing Address 325 Hannon Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2011

City	State	Zip Code
Monterey	CA	93940

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
Fundraising Consulting

003

Transaction ID : EXPB14129

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3106.13

43138.33



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 60

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. David Weprin for Congress**

Mailing Address 72-50 Austin Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2011

City	State	Zip Code
Forest Hills	NY	11375

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Contribution

011

Transaction ID : EXPB14039

Candidate Name

**David Weprin**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2011

☐ Primary ☐ General  
☒ Other (specify)

State: NY

District: 09

Full Name (Last, First, Middle Initial)

**B. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		23		2011

City	State	Zip Code
Washington	DC	20003

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Excess Campaign Funds to National Party

011

Transaction ID : EXPB14107

Candidate Name

**Democratic Congressional Campaign Committee**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Democratic Women of Monterey County**

Mailing Address Post Office Box 223003

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		16		2011

City	State	Zip Code
Carmel	CA	93922

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution to Non-Federal Committee

011

Transaction ID : EXPB14029

Candidate Name

**Democratic Women of Monterey County**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 60

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. Monterey Bay Central Labor Council COPE**

Mailing Address 931 East Market Street

City	State	Zip Code
Salinas	CA	93905

Purpose of Disbursement  
Contribution to Non-Federal Committee

011

Candidate Name

**Monterey Bay Central Labor Council COPE**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2011

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : EXPB13991

**B. Monterey Bay Central Labor Council COPE**

Mailing Address 931 East Market Street

City	State	Zip Code
Salinas	CA	93905

Purpose of Disbursement  
Contribution to Non-Federal Committee

011

Candidate Name

**Monterey Bay Central Labor Council COPE**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		17		2011

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : EXPB14030

**c. Monterey County Democratic Central Committee**

Mailing Address P.O. Box 3024

City	State	Zip Code
Monterey	CA	93942

Purpose of Disbursement  
Contribution to Local Party Committee

011

Candidate Name

**Monterey County Democratic Central Committee**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2011

Amount of Each Disbursement this Period

45.00
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Transaction ID : EXPB14047

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5045.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 60

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Friends of Farr**

Full Name (Last, First, Middle Initial)

**A. Monterey County Democratic Central Committee**

Mailing Address P.O. Box 3024

City	State	Zip Code
Monterey	CA	93942

Purpose of Disbursement  
Contribution

011

Candidate Name

**Monterey County Democratic Central Committee**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		27		2011

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : EXPB14119

**B. Rancho Cielo Youth Campus**

Mailing Address P.O. Box 6948

City	State	Zip Code
Salinas	CA	93912

Purpose of Disbursement  
Civic Donation

012

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		13		2011

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : EXPB14057

**c. Salinas Valley Democratic Club**

Mailing Address 931 E. Market Street

City	State	Zip Code
Salinas	CA	93905

Purpose of Disbursement  
Contribution

011

Candidate Name

**Salinas Valley Democratic Club**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2011

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : EXPB13942

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

13545.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 60 OF 60

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Friends of Farr**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**National Democratic Club**

Nature of Debt (Purpose):

Fundraising Catering

Mailing Address 30 Ivy Street, SE

City State

Zip Code

Washington

DC

20003

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD14147

Amount Incurred This Period

803.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

803.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Patricia Tempel dba Tempel's of Carmel Florist**

Nature of Debt (Purpose):

Flowers for Constituents

Mailing Address 3604 The Barnyard

City State

Zip Code

Carmel

CA

93923

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD14146

Amount Incurred This Period

135.09

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.09

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**The Frost Group, LLC**

Nature of Debt (Purpose):

Fundraising Catering

Mailing Address 3422 Porter Street, NW

City

State

Zip Code

Washington

DC

20016

Outstanding Balance Beginning This Period

0.00

Transaction ID : PAYD14139

Amount Incurred This Period

334.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

334.75

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

1272.84

2) **TOTALS** This Period (last page this line number only) ..... ▶

1272.84

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1272.84